

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Scott Pinsonnault et al. :
: Art Unit: 3629
Serial No.: 10/820,425 :
: Examiner: Carter, Candice D.
Filed: April 8, 2004 :
For: WEB-BASED METHODS :
AND SYSTEMS FOR :
EXCHANGING :
INFORMATION AMONG :
PARTNERS :

**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

TRANSMITTAL

1. Transmitted herewith is:
Transmittal (3 pages)
Amendment in response to Office Action dated December 17, 2008 (41 pages)

STATUS

2. Applicant
☐ claims small entity status.
☒ is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

| Extension for response within: | Other than small entity Fee | Small entity Fee (if applicable) |
|---|--------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> first month | \$ 130.00 | \$ 65.00 |
| <input type="checkbox"/> second month | \$ 490.00 | \$ 245.00 |
| <input type="checkbox"/> third month | \$ 1,110.00 | \$ 555.00 |
| <input type="checkbox"/> fourth month | \$ 1,730.00 | \$ 865.00 |
| <input type="checkbox"/> fifth month | \$ 2,350.00 | \$1,175.00 |
| | Fee Due | <u>\$ 130.00</u> |

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of _____ months has already been secured. The fee paid therefor \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | | (Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR | (Col. 3) PRESENT EXTRA | SMALL ENTITY ADDITIONAL RATE FEE | OR | OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE |
|---|-------|---|------------------------------|--|----|--|
| TOTAL INDEP. | MINUS | | = | x \$26.00 = \$ | | x \$52.00 = \$ |
| | MINUS | | = | x \$110.00 = \$ | | x \$220.00 = \$ |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | + \$195.00 = \$ | | + \$390.00 = \$ |
| | | | | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$ |

- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$

- ☒ Charge Deposit Account No. 01-2384 the sum of \$ 130.00
A duplicate of this transmittal is attached.

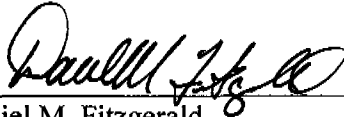
FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:


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